

MINUTES
UTAH
MARRIAGE AND FAMILY THERAPY
MEETING

March 23, 2007

Room 475 – 9:00 A.M.
Heber Wells Building
Salt Lake City, UT 84111

CONVENED: 9:05 A.M.

ADJOURNED: 11:59 A.M.

Bureau Manager:
Board Secretary:

Noel Taxin
Karen McCall

Board Members Present:

Karen Feinauer
James M. Harper, Ph.D., Chairperson
Lanae Valentine, Ph.D.
Richard Nielsen, Ph.D.

Board Members Absent:

Jean N. Soderquist, Ph.D.

Guests:

Bonnie Hargreaves, U of U Student

DOPL Staff Present:

F. David Stanley, Division Director

TOPICS FOR DISCUSSION

DECISIONS AND RECOMMENDATIONS

ADMINISTRATIVE BUSINESS:
MINUTES:

The minutes from the December 8, 2006 meeting were read.

Dr. Nielsen made a motion to approve the minutes as read. Ms. Feinauer seconded the motion. The Board vote was unanimous.

APPOINTMENTS:

10:00 A.M. – 10:30 A.M.

Dr. Suzanne Dastrup, Probationary Interview

Dr. Dastrup met for her probationary interview.

Dr. Harper conducted the interview.

Dr. Harper stated that Dr. Dastrup's supervisor, Dr. Veon Smith, has submitted the last 2 reports.

He stated that Dr. Smith reported he has randomly reviewed files and reported that 50% did not have treatment plans in the files and the case notes were vague. Dr. Harper requested Dr. Dastrup to respond.

Dr. Dastrup responded that she has not been consistent in writing the treatment plans. She stated that Dr. Smith is educating her on how to do a treatment plan for all her files. Dr. Dastrup stated that Dr. Smith has reviewed all but 3 of her files and will be coming to her office on Thursday this week to review those 3 files. She reported that she now has treatment plans and case notes in all files.

Dr. Harper asked Dr. Dastrup to respond regarding her feelings about completing the assignment and task of treatment plans and case notes.

Dr. Dastrup responded that it feels good to her to know she has accomplished the task. She stated that most of her clients are cash paying clients as they do not have any insurance. She stated that she has not had to meet the same requirements as required of a State agency or an insurance company and has not been diligent in putting treatment plans and case notes in her files.

Ms. Taxin commented that the treatment plans and case notes in each file protect Dr. Dastrup as well as the client.

Ms. Taxin asked if Dr. Dastrup is comfortable with the treatment plan she is using or if she would like to review others.

Dr. Dastrup responded that she is comfortable with the treatment plan she is using as it is a good plan, however, Dr. Smith has recommended she get a computer program to assist with writing the plans as they are time consuming when written long hand.

Dr. Harper stated that Dr. Smith has reported that he has encouraged Dr. Dastrup to do a separate genogram. He asked if she is following that advice.

Dr. Dastrup responded that it has been hard for her to do a separate genogram as she likes to write notes on the genogram. She stated that Dr. Smith thought it would be easier to continue to add a genogram to each file but on a separate sheet as referring to the genogram give her the opportunity to expand as she works with her clients.

Ms. Taxin asked if it might be easier to have the genogram and notes but dictate a summary at the end of each session to include in the file. She stated that if Dr. Dastrup was asked to produce her notes by the Division or a client she would then be able to have the information for any specific session or day.

Dr. Dastrup did not respond to Ms. Taxin's question regarding dictating a summary to include with each file.

Dr. Harper asked if Dr. Dastrup is trying to change old habits of writing on the genogram.

Dr. Dastrup responded that she is trying to be consistent.

Ms. Taxin stated that she and the Board are trying to help her change from bad habits to good habits. She stated that having current case notes in each file will protect Dr. Dastrup if any incident comes to the attention of the Division or any other regulatory agency.

Dr. Nielsen asked how often Dr. Dastrup meets with Dr. Smith.

Dr. Dastrup responded that they meet every Thursday at 9:00 am.

Dr. Nielsen asked if they have make up meetings when she misses a meeting.

Dr. Dastrup responded that they do not make up meetings but they have talked on the phone. She explained that she was sick one week, was out of town

one week and one Thursday was a Holiday.

Dr. Valentine asked when Dr. Dastrup takes the time to write the case notes.

Dr. Dastrup responded that she has made a commitment to Dr. Smith to have the case notes for each day completed by the end of each day.

Ms. Taxin asked Dr. Dastrup to commit to herself to complete case notes by the end of each day as Dr. Smith won't always be supervising her and checking on each file. She stated that she and the Board want Dr. Dastrup to learn and see the benefits for herself and for her clients.

Dr. Harper asked if Dr. Dastrup has any questions for the Board.

Dr. Dastrup responded that she received a phone call from client X, who requested a copy of her file. She stated that she informed client X that she would need a notarized written request. Dr. Dastrup stated that the written request was received but not notarized, however, she made a copy of the file and sent it to client X.

Ms. Taxin interrupted Dr. Dastrup and stated that she and Dr. Dastrup talked about the mentioned information and no further discussion was necessary.

An appointment was made for Dr. Dastrup to meet again June 1, 2007.

Dr. Nielsen commented that Dr. Dastrup's attitude was different today than it has been at previous meetings. He stated that he attributes the change to having the right supervisor for her.

Dr. Harper commented that he also attributes the change in her supervisor being aware of the Board expectations. He stated that the Board and Ms. Taxin did a better job of explaining the expectations to Dr. Smith than to the previous supervisor.

Ms. Feinauer commented that the expectations should always be clearly delineated and specific for supervisors to know what is expected of them and expected on the reports.

Ms. Taxin agreed with Dr. Nielsen, Dr. Harper and Ms. Feinauer and commented that she would like to see consistent supervisor reports on all probationers and that all supervisors are informed on the process.

10:45 A.M. to 11:15 A.M.

Dr. David Gardner, Probationary Interview

Dr. David Gardner met for his probationary interview.

Dr. Harper conducted the interview.

Dr. Gardner commented that he has been doing some informal consulting as he is not currently employed. He asked Ms. Taxin if a letter from Dr. Robert (Bob) Stahmann was received.

Ms. Taxin responded that she has not received a letter from Dr. Stahmann.

Dr. Gardner stated that Dr. Stahmann was unable to attend this meeting today, but he did write Dr. Gardner a letter regarding a proposal for working with him as the supervisor. Dr. Gardner submitted the letter for the Board to review.

Dr. Harper read the letter to the Board.

The Board noted that Dr. Stahmann agreed to supervise for 6 months, meet no less than 1 hour every other week in face to face meetings, review clinical charts and records, discuss segments of ongoing cases, review video tapes of sessions, report to the Utah Licensing Board as directed and report to the Utah Association of Marriage and Family Therapy as directed, upon approval by the Utah Licensing Board. The letter stated that Dr. Stahmann's goal would be to serve as an objective professional peer who will provide direct feedback to the Board regarding Dr. Gardner's therapy service and regarding his ability to provide

appropriate professional service to clients to protect the public interest.

Dr. Gardner stated that he talked with Craig M. Snyder, his previous attorney, as he requested Dr. Gardner to evaluate the mental health of some clients for his court proceedings. Dr. Gardner stated that he disclosed this information to Dr. Stahmann. Dr. Gardner clarified for Craig M. Snyder, the attorney, that he could not be a family evaluator for the case as he is not licensed but he would be willing to consult as a non-licensed evaluator with experience.

Dr. Harper stated that the letter lays out a plan for Dr. Stahmann to supervise Dr. Gardner which Ms. Taxin suggested Dr. Gardner develop and present today. Dr. Harper asked Dr. Gardner if, under this plan, he would be a private practitioner or working with Dr. Stahmann.

Dr. Gardner responded that he would be a private practitioner with supervision only from Dr. Stahmann.

Dr. Harper asked if Dr. Gardner would be advertising as a private practitioner.

Dr. Gardner responded that it is his understanding that he could not advertise as a private practitioner but he could accept referrals.

Dr. Harper asked if Dr. Gardner would rent office space.

Dr. Gardner responded that he would not need to rent office space as he built an office in his home several years ago.

Dr. Gardner explained that he has discussed offering a Master's seminar for Universities. He stated that students would bring their clients to the clinic and he would act in an adjunct position where the students watch the sessions. He stated that it would be like a mentoring situation. Dr. Gardner stated that he has also contacted Utah Valley State University to discuss a proposal of mental health clinics in Heber and a program for their campus to conduct group therapy

sessions.

Ms. Taxin brought the discussion back to Dr. Gardner and Dr. Stahmann's proposal. She asked if the Board thought it would reasonable for Dr. Gardner to be in private practice no more than 20 hours a week.

Dr. Gardner responded that if he is expected to do 20 hours a week he would be a very busy practitioner.

Ms. Taxin stated that she asked if the Board would consider no more than 20 hours a week. She clarified that, with Board approval, he could work less hours but no more than 20 hours a week.

Dr. Gardner responded that he has never had a full time practice and he does not plan to be a full time practitioner as he has 3 other businesses that he will have to continue working. He stated that if he and the Board get stuck with the requirements of the original Stipulation then all should look at the spirit of the plan and not the specific requirements.

Dr. Harper commented that he is concerned that Dr. Stahmann has agreed to supervise for 6 months. He asked what happens after the 6 months if the Board determines that Dr. Gardner will need supervision for a longer period of time. Dr. Harper asked if Dr. Gardner thought Dr. Stahmann would agree to supervise until the Board determines he is safe to practice without supervision.

Dr. Gardner responded that Dr. Stahmann is in the process of retiring and does not want his life controlled by Dr. Gardner, the Board or the Division. He stated that could talk with Dr. Stahmann about renegotiating the time frame.

Ms. Taxin stated that if Dr. Stahmann would not be available for a minimum of one year then Dr. Gardner would need to locate a different supervisor after the 6 month period.

Dr. Gardner responded that Dr. Stahmann will be out

of town until Monday and if the Board will approve Dr. Stahmann today then he will work out the logistics later with Dr. Stahmann

Ms. Taxin stated that an approval is more involved than the Board saying they approve Dr. Stahmann's proposal. She stated that she will need to read through the letter and review the current discussion information as a change to the original Stipulation and Order.

Ms. Taxin then read the proposed revised Stipulation.

Dr. Gardner responded to the proposed revised Stipulation that Mr. Stahmann does not want to meet weekly with him but does want all the session's video taped for him to review all tapes and all files.

Dr. Gardner commented that the proposed revised Stipulation states addictive types of behaviors which include all types of addiction from substance abuse to pornography. He stated that he disagreed with the wordage of addictive types of behaviors and would not sign the Stipulation until the appropriate wordage is used in the document.

Dr. Gardner stated that he would always include his supervisor for discussion and comments prior to conducting an evaluation or therapy with anyone who has a substance abuse problem to decide if he should take them on as a patient or not.

Ms. Taxin responded that the supervisor would have to review all substance abuse cases. She stated that the proposed revised Stipulation includes Dr. Gardner being sober, alert, awake, using appropriate language and to conduct himself with professional behavior.

Dr. Gardner interrupted Ms. Taxin and stated that he would like to remind Ms. Taxin and the Board that the original Stipulation and Order documents that he denied all the above list vehemently. He stated that there is a degree of insensitivity by bringing up things that should not be addressed.

Ms. Taxin asked Dr. Gardner if he would agree to get a current psychological evaluation and have the evaluator write a recommendation.

Dr. Gardner interrupted the conversation by commenting that when “Noel” twists her hair it is a diagnosable behavior.

Dr. Gardner then responded to Ms. Taxin that he should not need a psychological evaluation as he already had one when he was originally put on probation.

Ms. Taxin stated that a psychological evaluation might address issues which would decrease some of the clauses in the new Stipulation and Order if addressed by a Psychologist.

Dr. Gardner responded that he had the psychological evaluation, paid for it and does not have a substance abuse problem. He stated that if the Board wants to pay for him to obtain another evaluation then he would get one.

Dr. Harper commented that he has observed that it is hard for Dr. Gardner to read what comments are appropriate and when comments are not appropriate. He stated that Dr. Gardner has made some comments at past Board meetings and again today that have been inappropriate.

Dr. Gardner responded that he can give comments and then put his thoughts into a box and be ok to move on.

Ms. Taxin responded to Dr. Gardner that the Division or the Board will not pay for an evaluation. She stated that Dr. Gardner does not meet the requirements outlined in the current Stipulation and Order. Ms. Taxin stated that it would be an easy way for her to review an outside evaluation and assessment regarding Dr. Gardner being a safe practitioner. She stated that an evaluator would have to assess issues from Dr. Gardner’s case and submit an evaluation and recommendation for the Division/Board to review

to consider what requirement should be in a revised Stipulation and Order. She stated that if the evaluator reported concerns and/or issues in specific areas then the Division/Board would have to consider those concerns and/or issues.

Dr. Harper stated that he did not believe another evaluation would give Ms. Taxin or the Board additional information.

Ms. Taxin asked Dr. Gardner the question, what if a client said something and he got angry with the client's comment as he presented with the Board today. She stated that that would be a concern to her and the Board.

Dr. Gardner responded that in his opinion it is appropriate to get angry with clients when they say or do something that he needs to address.

Dr. Harper commented that he was not aware of the original Stipulation and Order requiring Dr. Gardner to use appropriate language.

Ms. Taxin clarified that if Dr. Gardner is not appropriate and professional in his sessions then there is a concern. She stated that during sessions he should be awake, he should not be swearing, or show any anger, etc. Ms. Taxin stated that she is not saying Dr. Gardner has done these things during therapy but she is saying that he needs to be sure he does not. Ms. Taxin stated the amended Stipulation and Order was completed and agreed upon verbally with Dr. Gardner and his attorney a year ago.

Ms. Taxin stated if Dr. Gardner works less than 16 hours a week it is considered working part time.

Dr. Gardner responded that the Stipulation should require probation until X number of hours is completed or X number of clients are being seen rather than X number of hours a week. He stated that if the Board and Ms. Taxin would agree to that type of working he would agree to move forward with a revised Stipulation.

Dr. Harper reminded Dr. Gardner that sometimes there are constraints and guidelines that have to be included in a Stipulation and followed by the probationer. He stated that prior to Dr. Gardner's appointment the Board discussed his random drug testing and that he has been testing for 3 or 4 years. He stated that the Board is of the opinion that Dr. Gardner has met that requirement. He stated that if Dr. Gardner was drinking on the job it would not be good for him or the clients.

Dr. Gardner responded that anyone impaired is a potential harm to the public as the impaired person is not function fully when impaired.

Dr. Harper stated that the Board has reviewed Dr. Stahmann's proposal and noted some modifications. He stated that Ms. Taxin will now need to review and create a document with requirements for Dr. Gardner to review.

Ms. Taxin reminded the Board that Dr. Gardner has been doing the drug tests since May 2004 and has 2 positive tests during that period of time.

Dr. Gardner interrupted and stated that while on the drug testing program you must call in every day or it is considered a positive.

Dr. Harper remarked that the 2 positive tests since May 2004 are not a concern at this time to the Board. He asked if there is any other information Dr. Gardner would like the Board to know.

Dr. Gardner responded that there is no other information.

Ms. Taxin stated that if the Board wants to terminate the drug testing there will need to be a motion.

She informed Dr. Gardner that if the motion is made and approved he must still continue to call daily until the paperwork has been completed to terminate the drug testing. She also reminded the

Board that Dr. Gardner's probation will continue to be on hold until he obtains employment or until she has a new Stipulation written and signed by Dr. Gardner.

Dr. Valentine made a motion to remove the drug testing based on Dr. Gardner's consistent negative tests.

Ms. Feinauer seconded the motion.

The Board vote was unanimous.

Ms. Taxin stated that the Board would not be meeting again until June 1, 2007.

Dr. Gardner responded that when Ms. Taxin gets a revised Stipulation drafted to contact him to review it and he will contact Dr. Stahmann regarding this meeting.

Ms. Taxin suggested to Dr. Gardner to drink appropriately and responsibly if he is going to drink and to be sure not to drive if he has been drinking.

Dr. Gardner left the meeting.

Ms. Taxin explained that the conditions in the revised Stipulation will say "as per Board approval". She requested input from the Board.

Dr. Harper commented that he has a concern regarding Dr. Gardner being able to know boundaries when in discussion situations or therapy situations and making appropriate comments in those situations. He stated that Dr. Gardner's comment to Ms. Taxin regarding twisting her hair was an inappropriate comment in a Board meeting setting.

Ms. Taxin stated that Dr. Gardner has not practiced for many years and now is proposing that he be allowed to do private practice. She stated that he has applied for many positions but has not been successful.

Dr. Harper stated that it makes sense to him to require a specific number of hours of practice with a specific number of hours of supervision. He stated that he is not comfortable with only one hour of supervision every 2 weeks. Dr. Harper recommended that Dr. Gardner be required weekly supervision for the first 6 weeks and then go to supervision every 2 weeks.

Dr. Harper stated that he would be comfortable with Dr. Gardner treating substance abuse clients but would want each case to be reviewed and supervised. Dr. Harper stated that Dr. Gardner should not be prohibited from seeing substance abuse clients as he could take them after he is off probation and no longer being supervised.

Ms. Taxin asked if the Board would want all the sessions video taped and if the Board wants Dr. Gardner to retain a log of all his clients.

Dr. Harper responded that Dr. Stahmann agreed to review all video taped sessions. Dr. Harper stated that Dr. Gardner should submit a log of all his practice hours if the Board is going to use a ratio of hours he works and required supervision. Dr. Harper stated that Dr. Gardner appears to be concerned that he will not be able to meet a requirement of 8 hours of therapy in a week as he currently has no clients. He stated that Dr. Gardner would have to build up his client base to meet any requirement.

Ms. Taxin commented that Dr. Gardner has said to her that he will have no problem getting clients. She stated that she believes it might a little more difficult than Dr. Gardner thinks.

Dr. Harper suggested Dr. Gardner be given a period of time to build his client base.

Ms. Taxin stated that she has a concern that Dr. Gardner's unofficial clients may become his official clients. Ms. Taxin stated that she will talk with the AG regarding Dr. Stahmann supervising Dr.

Gardner as they know each other well so the Stipulation and Order would not be able to say it must be someone who does not know Dr. Gardner. She stated that Dr. Stahmann would need to meet with the Board to discuss guidelines and the expectations of the Board.

Dr. Harper voiced concern regarding Dr. Stahmann, as the supervisor, being able to be firm with Dr. Gardner, if needed. Dr. Harper suggested 1 hour of supervision for every 10 hours of therapy be included in the Stipulation and supervision weekly until he has a minimum of 10 clients a week.

Ms. Taxin stated that the revised Stipulation was for an 18 month probationary period with the opportunity for Dr. Gardner to request early termination after 12 months of compliance.

Ms. Taxin asked how many clients a year or a month the Board would recommend.

Dr. Harper recommended 10 clients a month until he builds his clientele and the 10 clients a week during the probationary period.

Ms. Taxin asked what period of time the Board would allow for Dr. Gardner to build his clientele.

Dr. Harper responded that 6 months should give him time to get his mental health therapy business going.

Ms. Taxin concluded that she will complete the paperwork to discontinue the drug testing and will start drafting a revised Stipulation and Order with the AG to present to Dr. Gardner for review.

Dr. Harper asked Ms. Taxin to remind Dr. Gardner that the Board is being flexible with him by allowing him to be in private practice.

DISCUSSION ITEMS:

Concerns Regarding Extern Licensing

Ms. Taxin stated that some issues have come to her attention regarding the MFT Extern license. She

explained that the Extern license is for people in another State or in Utah who are short courses to meet Utah's licensing requirements. She stated that the Law states that they may be granted an Extern license if they are deficient 2 or more classes. Ms. Taxin stated that she believes the Law should be changed to say the person is deficient no more than 2 classes. She explained that an application was received for a Professional Counselor Extern where the applicant was deficient 8 courses and the Board recommended the Extern license be issued. She stated that another person with the Extern license went out and opened a private practice, has no supervisor then claimed that she did not know she could not have a private practice or that she needed supervision. She explained that applications have also come in where the Extern has counted the hours as part of the required 4000 hours of supervised experience. Ms. Taxin stated that the 4000 hours of supervised experience are only counted while licensed as an Intern and the applicant is then upset with the Division staff when they try to explain.

Ms. Taxin stated that it is her opinion that a person with an Extern license is not protecting the public from harm as supervisors do not understand the difference between the Extern license and the Intern license.

Dr. Harper asked if the Extern license is only for those who are short courses or could it be used for someone who was not supervised by an MFT supervisor in another State and the applicant needs additional supervision under an MFT supervisor here in Utah.

Ms. Taxin responded that the Extern is only for those who are short in the education requirement. She explained that all applicants must document the education or equivalent education to be licensed as an Intern. She stated that there are some education programs where there is no DSM course and/or advanced assessment course. She stated that issuing a license to these people to conduct mental health therapy could be harmful to the public and she has denied the application until the applicant completes a DSM course and/or an advanced assessment course.

Dr. Harper agreed that the Law should be changed to require the Extern license be issued if the applicant is deficient no more than 2 courses.

Ms. Feinhauer stated that the requirement should designate only specific courses may be lacking or state that if the DSM course and/or an Advanced Assessment course is missing the applicant will be required to complete those before applying for an Extern license.

Ms. Taxin stated that she discussed the issues with the Professional Counselors Licensing Board on Monday at their Board meeting and they voiced support for making a change. She stated that it would be a change in the Law and the Association would have to agree to open the Law to make the change.

Ms. Taxin stated that the change could say an Extern license may be issued if the applicant is deficient up to 2 courses that do not include a DSM course or an Advanced Assessment course.

Dr. Harper volunteered to contact the Utah MFT Association with the proposal.

Ms. Taxin stated that the Professional Counselor Board has created a list of all the specific required courses to obtain licensure. She explained when the Division staff does not see a DSM course or an Advanced Assessment course the application for Extern is most likely denied. She stated each application is reviewed and assessed individually, which sometimes takes hours to review syllabi and transcripts to determine if education meets Utah requirements.

Dr. Nielsen asked if there is any motivation for the Associations to take action at the 2008 Legislative session.

Dr. Harper responded that he believes the Association will agree that there needs to be a change in the Law.

Review Approved Supervisor Section of the Rules

Ms. Taxin asked the Board to review R156-60b-302d. Qualifications to be a Marriage and Family Therapist Training Supervisor and Mental Health Therapist Training Supervisor.

Ms. Taxin stated that the change that was made to this section of the Rules to include any licensed mental health therapist to be a supervisor if they have completed specific education and training has been very confusing to the Division staff and to the public. She stated that she believes there are LCSW's who do not meet the requirements that are supervising MFT Interns. Ms. Taxin stated the additional education requirement seems to be extreme to make already licensed practitioners retake coursework. Ms. Taxin stated that the other mental health therapy professions Laws and Rules say that the mental health therapist must be licensed and have been in a clinical practice a minimum of 2 years before beginning to supervise.

Dr. Harper explained that the Board and profession want the supervisors to complete a supervision course. He stated that that every COAMFTE accredited Master's program have the courses available as does AAMFT. Dr. Harper stated that AAMFT requires licensee's to renew their membership every 5 years and each AAMFT supervisor is required to document that they have take additional courses to retain the AAMFT supervision approval.

Dr. Harper stated for the record that he wants to make clear that he will abstain from the vote as he does not want to have a conflict of interest regarding his wife being an LCSW and he and his wife profiting from the LCSW being allowed to supervise MFT Interns.

Dr. Harper recommended the Rules read as follows:

Pursuant to the provisions of Subsection 58-60-307(1), to be qualified as a marriage and family therapist supervisor for training required under Subsections 58-60-305(1)(e) and (f), an individual shall:

(1) be currently approved by AAMFT as a

marriage and family therapist supervisor and be currently licensed in good standing as a marriage and family therapist in the state in which the supervised training is being performed; or
(2) be currently licensed in good standing as a marriage and family therapist in the state in which the supervised training is being performed; and meet the following requirements:
(a) have lawfully engaged in the practice of mental health therapy for not less than two years; and
(b)(i) have successfully completed a supervision course in a Commission on Accreditation for Marriage and Family Therapy Education (COAMFTE) accredited marriage and family therapy (MFT) program at an accredited university; or
(ii) have successfully completed 20 clock hours of instruction sponsored by AAMFT or the Utah Association of Marriage and Family Therapists (UAMFT) as follows:
(A) four hours of review of models of MFT and supervision
(B) eight hours of MFT supervision processes and practice;
(C) four hours of research on effective outcomes and processes of supervision; and
(D) four hours of AAMFT Code of Ethics, state rules and case studies related to MFT supervision.

Dr. Harper recommended that part (3) be deleted from the Rules.

Dr. Harper stated that the justification for making the change in the Rules is that the Board was unable to foresee the problems and confusion that the part (3) category would cause. He stated that taking part (3) out of the Rules is to clarify who is qualified to supervise.

Ms. Taxin stated that there should be no cost to applicants involved as no one has contacted the Division regarding being approved by the requirements in part (3).

Dr. Harper recommended that applicants be required to submit a form and a copy of the

certificate that is given to the MFT supervisor with the MFT Intern application.

Ms. Taxin asked the Board to respond to Dr. Harper's comments and recommendations. She stated that when Dr. Thorana Nelson met with the Board Dr. Thorana Nelson stated that people in the supervision education program are supervising MFT's under her supervision. Ms. Taxin asked if it is acceptable to the Board to supervise while taking the courses.

Dr. Harper responded that AAMFT supervisors have to be supervised. He stated that Dr. Thorana Nelson is taking her model from the AAMFT model.

All Board members agreed that in order to be a supervisor a person needs to complete the course from AAMFT and that current students in the program don't meet that requirement even though they are being supervised.

Ms. Feinauer stated that every qualified supervisor should have the certificate to submit a copy with the MFT Intern's application.

Dr. Harper stated that any MFT, LCSW, PC or Psychologist may take the course. Dr. Harper stated that he has seen many mental health professionals who have a good systemic perspective and have taken additional courses that would qualify them to be quality MFT supervisors.

Dr. Nielsen voiced concerns regarding other mental health practitioners supervising MFT Interns. He stated that he is not sure that taking the AAMFT course will convert other mental health practitioners to the systemic perspective of thinking.

Ms. Taxin asked if the Board still wants to open the supervision to other mental health practitioners.

Ms. Feinauer commented that she would rather see mental health practitioners being qualified to

supervise than having a MFT supervisor that has to travel so far to give the supervision in the rural areas of Utah.

Dr. Valentine commented that she understands more supervisors are needed in rural areas but agrees with Dr. Nielsen regarding concerns with other mental health practitioners supervising MFT Interns.

Ms. Taxin concluded that the Board should make a motion regarding any change to the Rules but prior to conducting a hearing the Association should have a copy to review and time to make comments in case they have concerns.

**Ms. Feinauer made the following motion:
For R156-60b-302d. Qualifications to be a
Marriage and Family Therapist Training
Supervisor and Mental Health Therapist Training
Supervisor.**

Pursuant to the provisions of Subsection 58-60-307(1), to be qualified as a marriage and family therapist supervisor for training required under Subsections 58-60-305(1)(e) and (f), an individual shall:

- (1) be currently approved by AAMFT as a marriage and family therapist supervisor and be currently licensed in good standing as a marriage and family therapist in the state in which the supervised training is being performed; or**
- (2) be currently licensed in good standing as a marriage and family therapist in the state in which the supervised training is being performed; and meet the following requirements:**
 - (a) have lawfully engaged in the practice of mental health therapy for not less than two years; and**
 - (b)(i) have successfully completed a supervision course in a Commission on Accreditation for Marriage and Family Therapy Education (COAMFTE) accredited marriage and family therapy (MFT) program at an accredited university; or**
 - (ii) have successfully completed 20 clock hours of instruction sponsored by AAMFT or the Utah Association of Marriage and Family Therapists**

(UAMFT) as follows:

(A) four hours of review of models of MFT and supervision

(B) eight hours of MFT supervision processes and practice;

(C) four hours of research on effective outcomes and processes of supervision; and

(D) four hours of AAMFT Code of Ethics, state rules and case studies related to MFT supervision.

Ms. Feinauer's motion included to delete part (3) from the Rules.

Also, due to the Rules requiring the courses be completed, the Board will no longer accept supervision of supervision hours to count toward the required 4000 hours of supervised training.

Dr. Valentine seconded the motion.

The Board vote was unanimous.

Ms. Feinauer made a motion to change R156-60b-302a(1)(ii) and (2) (B) to add the language of "including DSM".

Dr. Valentine seconded the motion.

The Board vote was unanimous.

Ms. Taxin asked the Board to review all the Rules to be sure there is nothing else that should be changed for clarification. She asked the Board to contact her if there are additional changes and she will write the changes for the Board to review at the June 1, 2007 Board meeting. Ms. Taxin stated that she will invite Alan Springer, Association President, to meet at the June 1, 2007 Board meeting for discussion of the proposed Rule changes.

FYI

F. David Stanley, Division Director, briefly stepped into the meeting and then had to leave to attend to other Division business.

Ms. Taxin introduced him to the Board.

Board members welcomed Mr. Stanley.

Ms. Taxin then gave the Board a short background of Mr. Stanley and informed them that Mr. Stanley's experience has been in the construction trades. She stated that Mr. Stanley is a good man who has ethical values, is calm and not impulsive in making his decisions. She stated that he is a good leader and will be a benefit to the Division. Ms. Taxin stated that Mr. Stanley will attend Board meeting periodically. She stated that she will sometimes give him a brief update when he attends to bring him current with the discussion. Ms. Taxin recommended the Board try to use full names during discussions instead of acronyms as it becomes confusing with so many professions and occupations to learn.

2007 Board Meeting Schedule

The Board noted the following dates for the 2007 Board meetings: June 1, September 14 and December 14, 2007.

Bonnie Hargreaves, Student Guest, Question

Ms. Taxin asked Ms. Hargreaves if she had any questions.

Ms. Hargreaves asked how long people are typically on probation.

Ms. Taxin responded that probation for MFT is typically 3 to 5 years but the time may be reduced if the Board determines the individual is safe to practice.

Ms. Hargreaves asked what probationers do to be put on probation.

Ms. Taxin and the Board responded that probationers have done something that would be harm a patient or the public.

Ms. Taxin suggested Ms. Hargreaves review the Mental Health Therapy Laws and MFT specific Rules under unprofessional conduct and unlawful conduct as any of those item listed could cause a licensee to be put on probation.

Dr. Harper explained that if the Division receives a

complaint an investigator is assigned to investigate. He stated that the Board does not hear about or review complaints. He stated that the licensees that appear before the Board for their probationary interview have already been through the complete process of having been investigated, gone to a hearing or Stipulated and then meet with the Board to monitor their requirements of probation.

Ms. Hargreaves asked if Dr. Dastrup is required to have a supervisor.

Dr. Harper responded that Dr. Dastrup is required to be supervised. He explained that, depending on the violation, most probationers are required to have a supervisor who writes and sends a report to the Division for the Board to review.

Ms. Taxin stated that all Stipulations and Orders are public information and Ms. Hargreaves may request the public information on any probationer.

Ms. Hargreaves asked if the supervisor is required to send monthly reports.

Dr. Harper explained that if the Stipulation and Order requires a monthly report then the supervisor sends the reports monthly.

Ms. Hargreaves thanked the Board for their time and explanations and for allowing her to sit in on their meeting.

NEXT MEETING SCHEDULED FOR:

June 1, 2007

ADJOURN:

A motion to adjourn was made by Dr. Nielsen. Dr. Valentine seconded the motion. **The Board vote was unanimous.**

The time is 11:59 am and this meeting is adjourned.

Note: These minutes are not intended to be a verbatim transcript but are intended to record the significant features of the business conducted in this meeting. Discussed items are not necessarily shown in the chronological order they occurred.

June 1, 2007
Date Approved

(ss) Richard Nielsen, Ph. D.
Acting Chairperson, Marriage and Family Therapy
Board

May 18, 2007
Date Approved

(ss) Noel Taxin
Bureau Manager, Division of Occupational &
Professional Licensing